

**U.S. DEPARTMENT OF DEFENSE (NATIONAL CAPITAL REGION)  
PUBLIC TRANSPORTATION BENEFIT PROGRAM APPLICATION**

*(Upon completion, fax application to (703) 614-4211)*

**IMPORTANT:** To process this application, you must select one of the following. Are you (*X only one*):

☐ ENROLLING    ☐ WITHDRAWING    ☐ MAKING A CHANGE

**PRIVACY ACT STATEMENT**

**AUTHORITY:** Public Law 101-509.

**PRINCIPAL PURPOSE(S):** To facilitate timely processing of your request, to ensure your eligibility, and to prevent misuse of the funds involved.

**ROUTINE USE(S):** This information will be matched with lists at other Federal agencies to ensure that you are not listed as a carpool or vanpool participant or a holder of any other form of vehicle worksite parking permit with DoD or any other Federal agency.

**DISCLOSURE:** Voluntary; however, failure to furnish the information on this form may result in disapproval of your request for a public transit fare benefit.

**INSTRUCTIONS**

- Print or type all information.

- Applications must be filled out completely. Incomplete or illegible applications will not be processed.

**NOTE:** There is a five (5) day waiting period between the receipt of this application and the availability of the transit voucher. DOT does not confirm receipt of applications.

**1. APPLICANT INFORMATION**

a. LAST NAME		b. FIRST NAME		c. MIDDLE INITIAL	
d. CITY ( <i>Residence</i> )			e. STATE		f. ZIP CODE
g. OFFICE TELEPHONE NUMBER ( <i>Include Area Code</i> )	h. LAST 4 DIGITS OF YOUR SSN	i. WHAT ORGANIZATION ARE YOU WITH? ( <i>Enter code from list on back</i> ) <div style="border: 1px solid black; width: 100px; height: 15px; margin: 2px 0;"></div> OTHER ( <i>If not listed, specify</i> ): _____		j. LOCATION/BUILDING	
k. ARE YOU: ( <i>X one only</i> ) <input type="checkbox"/> CIVILIAN ( <i>Go to 1.o.</i> ) <input type="checkbox"/> MILITARY <input type="checkbox"/> NON-APPROPRIATED FUNDS (NAF) ( <i>Go to 1.n.</i> )	l. ARE YOU: ( <i>X one only</i> ) <input type="checkbox"/> OFFICER <input type="checkbox"/> ENLISTED	m. ARE YOU: ( <i>X one only</i> ) <input type="checkbox"/> AIR FORCE <input type="checkbox"/> NAVY <input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS		n. FOR NAF EMPLOYEES ONLY ( <i>X one only</i> ) <input type="checkbox"/> AIR FORCE <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> ARMY <input type="checkbox"/> OTHER <input type="checkbox"/> NAVY	
o. ARE YOU ISSUED A FEDERALLY SUBSIDIZED PARKING PASS? <input type="checkbox"/> YES <input type="checkbox"/> NO    IF YES, WHERE DO YOU PARK? _____					
p. BEFORE APPLYING FOR THIS TRANSIT BENEFIT, DID YOU: <input type="checkbox"/> DRIVE TO WORK <input type="checkbox"/> USE SOME FORM OF MASS TRANSIT					

**2. MODES OF TRANSPORTATION TO BE USED TO AND FROM WORKPLACE (*X all that apply*)**

☐ METRO BUS    ☐ METRO RAIL    ☐ COMMUTER BUS    ☐ COMMUTER TRAIN    ☐ VANPOOL  
☐ METRO SMARTIP CARD ID NUMBER (*If applicable*) \_\_\_\_\_

**3. EMPLOYEE CERTIFICATION**

**WARNING:** This certification concerns a matter within the jurisdiction of an agency of the United States and making a false, fictitious, or fraudulent certification may render the maker subject to criminal prosecution under Title 18, United States Code, Section 1001, Civil Penalty Action, providing for administrative recoveries of up to \$10,000 per violation, and/or agency disciplinary actions up to and including dismissal.

I certify that I am employed by the U.S. Department of Defense and am not named on a Federally subsidized workplace parking permit with DoD or any other Federal agency, or that I will relinquish my permit before or upon receiving the fare benefit.

I certify that I am eligible for a public transportation fare benefit, will use it for my daily commute to and from work, and will not transfer it to anyone else.

I certify that the monthly transit benefit I am receiving does not exceed my monthly commuting costs.

I certify that in any given month, I will not use the Government-provided transit benefit in excess of the statutory limit. If my commuting costs per month on public transit exceed the monthly statutory limit, then I will supplement those additional costs with my own funds rather than use a Government-provided transit benefit designated for use in a future month.

I certify that my usual (or estimated) monthly commuting costs are: \$ \_\_\_\_\_

a. EMPLOYEE SIGNATURE	b. DATE SIGNED (YYYYMMDD)
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**ORGANIZATION CODES.** Use these codes to complete Item 1.i., "Organization". If you are a military employee working for a Defense Agency, indicate your Branch of Service as your Organization.

#### U.S. AIR FORCE

**HAF** Headquarters Air Force  
**FOA/DRU** Field Operating Agency/Direct Reporting Unit  
**Other/AF** All other Air Force not listed above

#### U.S. ARMY

**HQDA** Headquarters, Department of the Army  
**AMC** US Army Materiel Command  
**CID** US Army Criminal Investigation Command  
**COE** US Army Corps of Engineers  
**DLI** Defense Language Institute  
**INSCOM** US Army Intelligence and Security Command  
**MC/SG** US Army Medical Command/The Surgeon General  
**MDW** US Army Military District of Washington  
**MTMC** Military Traffic Management Command  
**NGB** Army National Guard  
**OCAR** Office, Chief, Army Reserve  
**SPD** US Army Space and Missile Defense Command  
**Other/ARMY** All other Army not listed above

#### U.S. MARINE CORPS

**27 HQMC** Headquarters, Marine Corps  
**Other/MC** All other Marine Corps not listed above

#### U.S. NAVY

**11 N09BF** Director, Field Support Activity - all OPNAV  
**12 AAUSN** Assistant for Administration, USECNAV  
**14 CNR** Chief of Naval Research  
**15 INTCOM** Director, Office of Naval Intelligence  
**18 BUMED** Chief, Bureau of Medicine and Surgery  
**19 NAVAIR** Commander, Naval Air Systems Command  
**22 BUPERS** Chief of Naval Personnel  
**23 NAVSUP** Commander, Naval Supply Systems Command  
**24 NAVSEA** Commander, Naval Sea Systems Command  
**70 PACFLT** Commander in Chief, U.S. Pacific Fleet  
**NCTC** Naval Computer and Telecom Command  
**25 NAVFAC** Commander, Naval Facilities Engineering Command  
**30 SSP** Director, Strategic Systems Programs  
**33 MSC** Military Sealift Command  
**39 SPAWAR** Commander, Space and Naval Warfare Systems Command  
**60 LANTFLT** Commander in Chief, U.S. Atlantic Fleet  
**41 NSMA** Director, Naval Systems Management Activity  
**62 CNET** Chief of Naval Education and Training  
**65 METOC** Commander, Naval Meteorology and Oceanography Command  
**69 SECGRU** Commander, Naval Security Group Command  
**72 RESFOR** Commander, Naval Reserve Force  
**Other/NAVY** All other Navy not listed above

#### U.S. DEPARTMENT OF DEFENSE - COMPONENT

**AAFES** Army/Air Force Exchange Service  
**AFIS** American Forces Information Service  
**BMDO** Ballistic Missile Defense Organization  
**DARPA** Defense Advanced Research Projects Agency  
**DECA** Defense Commissary Agency  
**DCAA** Defense Contract Audit Agency  
**DCMA** Defense Contract Management Agency  
**DFAS** Defense Finance and Accounting Service  
**DHRA** DoD Human Resources Activity  
**DIA** Defense Intelligence Agency  
**DISA** Defense Information Systems Agency  
**DLA** Defense Logistics Agency  
**DLSA** Defense Legal Services Agency  
**DODEA** DoD Education Activity  
**DODIG** DoD Inspector General

**DOT&E** Director, Operational Test and Evaluation  
**DPMO** Defense POW/MP Office  
**DSCA** Defense Security Cooperation Agency  
**DSS** Defense Security Service  
**DTRA** Defense Threat Reduction Agency  
**DTSE&E** Director, Test Systems Engineering & Evaluation  
**JCS** Joint Chiefs of Staff  
**NIMA** National Imagery and Mapping Agency  
**NSA** National Security Agency  
**OEA** Office of Economic Adjustment  
**OSD** Office of the Secretary of Defense  
**STARS** Stars & Stripes  
**TMA** TRICARE Management Activity  
**USCAAF** U.S. Court of Appeals for the Armed Forces  
**WHS** Washington Headquarters Services